



POLICE RESERVE APPLICATION Cannon Falls Police Department

918 River Road
Cannon Falls, MN 55009
(507) 263-9300 (507) 263-5843 (FAX)

DATE & TIME RECEIVED:

The City of Cannon Falls is an equal opportunity/affirmative action employer and welcomes your application for the volunteer position of Police Reserve with its Police Department. It is the policy of the City of Cannon Falls to avoid discrimination in the employment process on the basis of sex, age, race, color, creed, religion, national origin, sexual orientation, or any other non-relevant personal characteristic. The information you are being asked to provide is defined to be Personnel Data under the Minnesota Government Data Practices Act. Pursuant to the Data Practices Act, some of this information is classified as "public data" and the remaining information is classified as "private data". Data classified as "public" can be released to any requestor. Data classified as "private" may only be released with your consent. The purpose for gathering this information is to provide the Cannon Falls Police Department with data necessary to administer the police reserve selection process. You are not required by law to provide the information being requested. Failure to provide any information requested in this application form will cause your name to be removed from the police reserve selection process.

Please use a typewriter, computer or print in black ink: Complete all blanks on this application, sign, and return to the Cannon Falls Police Department, Attn: Reserve Coordinator, 918 River Road, Cannon Falls, MN 55009.

PERSONAL INFORMATION

Full Name	Home Phone
Street Address	Work Phone
City, State, Zip Code	Cell Phone
Driver's License Number State of Issue	Email Address
Name, Address, and Phone Number of Someone Who Can Usually Locate You	

Have you applied to the Cannon Falls Police Reserve previously? Yes ☐ No ☐
If yes, when? _____

MINIMUM REQUIREMENTS

Instructions: Check the "yes" box to the right if each statement below is true about you. Check the "no" box if the statement is not true about you.	Answer
I am a US Citizen	Yes <input type="checkbox"/> No <input type="checkbox"/>
I am at least 18 years of age. If not, fill in the date you will turn 18 here:	Yes <input type="checkbox"/> No <input type="checkbox"/>
I possess a Minnesota driver's license <u>or</u> a valid driver's license from another state.	Yes <input type="checkbox"/> No <input type="checkbox"/>
My driving privileges in Minnesota (whether or not I have a Minnesota driver's license) are fully valid (NOT suspended, revoked, limited, or canceled).	Yes <input type="checkbox"/> No <input type="checkbox"/>

SCHOOLING

Instructions: List your high school or GED and all post-secondary schools you have attended, along with credits obtained, and any degrees, certificates, or diplomas received, and the dates attended.

School Location (City & State) and Phone Number	Credits Obtained	Degree, Certificate, or Diploma Received	Dates Attended
High School or GED			
College or Other Post-Secondary School			
College or Other Post-Secondary School			
College or Other Post-Secondary School			

CONVICTIONS & TRAFFIC OFFENSES

Convictions: In the spaces below, list every crime or traffic offense for which you have been convicted. Include traffic offenses, but not parking violations. If you are unsure of the exact offense(s) for which you may have been convicted, check with the court that convicted you for details. What is a conviction? "Conviction" means that a person has been charged with a crime and the person was found guilty of that crime, regardless of length of or imposition or execution of any sentence received, any deferred finding of guilt or imposition of sentence by the court, any continuance for dismissal granted by the court, or any expungement of the offense records or conviction. Pleading guilty, being found guilty, being diverted, being continued for dismissal, or paying a fine constitutes "conviction" for traffic offenses. Juvenile matters in which you were adjudicated delinquent are not considered convictions. However, if you were a juvenile but tried as an adult, the conviction should be listed. Attach additional sheets if more space is needed.

CRIME OR OFFENSE	STATUTE NUMBER of the Exact Offense(s) for Which You Were Convicted	NAME & LOCATION OF THE COURT THAT CONVICTED YOU	DATE YOU WERE CONVICTED

Attach additional sheets if additional space or explanation is needed.

EMPLOYMENT HISTORY

Important Instructions: List all jobs you have held in the last 10 years or since age 16. List chronologically, beginning with your current or most recent position first. If you had any periods of no employment lasting longer than 30 days, add a separate listing for that time period and explain.

List your employment by position. For example, if you spent three years as a security guard and one year as a security supervisor, all working for the same security company, you would have at least two position listings for that employer.

We evaluate your entire work history when scoring your application. Each position may be worth points, so please be complete. Please do not leave this section blank or refer to a resume. ***Only work experience listed on this form and in this exact format will be counted.*** You may add extra sheets, if necessary, but please make sure to include all the requested information.

Employer _____	Length of Position From (month/year) _____
Address _____	To (month/year) _____
Phone Number _____ Your Title _____	Total (years/months) _____
Supervisor _____ Supervisor's Title _____	_____ Full Time _____ Part Time
Principle Duties or Responsibilities:	May We Contact This Employer? _____ Yes _____ No
Reason for seeking new employment:	

Employer _____	Length of Position From (month/year) _____
Address _____	To (month/year) _____
Phone Number _____ Your Title _____	Total (years/months) _____
Supervisor _____ Supervisor's Title _____	_____ Full Time _____ Part Time
Principle Duties or Responsibilities:	May We Contact This Employer? _____ Yes _____ No
Reason for seeking new employment:	

Employer _____	Length of Position From (month/year) _____ To (month/year) _____ Total (years/months) _____ _____ Full Time _____ Part Time May We Contact This Employer? _____ Yes _____ No
Address _____	
Phone Number _____ Your Title _____	
Supervisor _____ Supervisor's Title _____	
Principle Duties or Responsibilities:	

Reason for seeking new employment:	

Employer _____	Length of Position From (month/year) _____ To (month/year) _____ Total (years/months) _____ _____ Full Time _____ Part Time May We Contact This Employer? _____ Yes _____ No
Address _____	
Phone Number _____ Your Title _____	
Supervisor _____ Supervisor's Title _____	
Principle Duties or Responsibilities:	

Reason for seeking new employment:	

Employer _____	Length of Position From (month/year) _____ To (month/year) _____ Total (years/months) _____ _____ Full Time _____ Part Time May We Contact This Employer? _____ Yes _____ No
Address _____	
Phone Number _____ Your Title _____	
Supervisor _____ Supervisor's Title _____	
Principle Duties or Responsibilities:	

Reason for seeking new employment:	

SIGNATURE

I certify that all of the statements and information provided by me in this application and in any attachments are true, complete and correct to the best of my knowledge and belief, and are made in good faith. I understand that any false information or omission of information from this application may be cause for rejection, disqualification, or dismissal if employed.

(Signature of Applicant)

(Date)

AUXILIARY AIDS AND ASSISTANCE

If, due to a disability, you need assistance in completing an application or if you anticipate that you will need auxiliary aids or service in the selection process, please notify Reserve Coordinator at (507) 263-2278.

Please submit this application and all requested attachments to:

**Cannon Falls Police Department
Attn: Reserve Coordinator
918 River Road
Cannon Falls, MN 55009
Phone: (507) 263-2278
Fax: (507) 263-2301**

Thank you for applying with the Cannon Falls Police Department! If you have questions about the police reserve program or the selection process, or would like more information about our department, please feel free to contact:

Police Reserve Coordinator
Cannon Falls Police Department
918 River Road
Cannon Falls, MN 55009
(507) 263-2278

Equal Opportunity/Affirmative Action Data

As an employer with an Affirmative Action program, we comply with governmental regulations, including Affirmative Action responsibilities where they apply.

The purpose of collecting the data requested below is to comply with state and federal Equal Opportunity Employment reporting and other legal requirements. It is for periodic government reporting purposes only. This form will be filed separately from your application and will not be used in our recruitment evaluation process. Inclusion or exclusion of data will not affect any recruitment selection decisions.

Your cooperation in providing the data is **voluntary**.

Name: (Last, First, Middle)		
Address:		
City:	State:	Zip:

Position Applying For:	Today's Date:
Police Reserve	
Birth Date: (Month/Day/Year)	
Check One: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Check One of the Following: (Ethnic Origin)	
<input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian/Alaskan Native	
<input type="checkbox"/> African/American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Other	
Check if any of the following are applicable:	
<input type="checkbox"/> Disabled Individual <input type="checkbox"/> Veteran <input type="checkbox"/> Disabled Veteran	
How were you made aware of this volunteer opportunity? Check all that apply.	
Newspaper (provide name): _____	
City of Cannon Falls Web Site: _____	
City Employee (provide name): _____	
Other (provide source): _____	